

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE <b>E</b> (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Charles Parkhurst for County Supervisor

Reset Form

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
5/15/12	Charles Parkhurst 501 10th Street Harlan, IA 51537	Self	Scratch pad	\$ 234.29	<input type="checkbox"/>
5/15/12	Charles Parkhurst 501 10th Street Harlan, IA 51537	Self	Signs	409.31	<input type="checkbox"/>
9/19/12	Charles Parkhurst 501 10th Street Harlan, IA 51537	Self	Signs	335.16	<input type="checkbox"/>
10/16/12	Charles Parkhurst 501 10th Street Harlan, IA 51537	Self	Newspaper Ad	318.00	<input type="checkbox"/>
10/30/12	Charles Parkhurst 501 10th Street Harlan, IA 51537	Self	K.N.O.D Radio Ad	90.00	<input type="checkbox"/>
11/12/12	Charles Parkhurst 501 10th Street Harlan, IA 51537	Self	Newspaper Ad	51.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$

TOTAL (if last  
page of this  
schedule) \$ 1,437.76

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule E)